

ISSUE SIDE STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Hayes J		04-10-01
O.I.P.E. CLASSIFIER		90	572
FORMALITY REVIEW	MTR	954	6/1/01
RESPONSE FORMALITY REVIEW	m	903	8/01/01

DC4 1954

INDEX OF CLAIMS

- ✓ Rejected N Non-elected
- = Allowed I Interference
- (Through numeral)... Canceled A Appeal
- + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	1/14/03
2	✓	✓	6/28/03
3	✓	✓	3-8-05
4	-	N	
5	-	N	
6	-	N	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	-	N	
14	✓	✓	
15	-	N	
16	-	N	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	0	
24	✓	0	
25	✓	0	
26	✓	0	
27	✓	0	
28	✓	0	
29	✓	0	
30	✓	0	
31	✓	0	
32	✓	0	
33	-	N	
34	-	N	
35	-	N	
36	✓	✓	0
37	✓	0	
38	✓	0	
39	✓	✓	
40	✓	✓	
41	✓	✓	
42	✓	✓	
43	✓	✓	
44	✓	✓	
45	✓		
46			
47			
48			
49			
50			

If more than 150 claims or 10 actions
staple additional sheet here

DC-617
8-2-01

(LEFT INSIDE)

Best Available Copy